

Submission for Parliamentary Inquiry into Breastfeeding

I joined the Australian Breastfeeding Association (ABA) six months before my baby was due. I had every intention of creating a successful breastfeeding relationship with my child, just as my sister has done with her son and my mother did with several of her children. I had armed myself with large amounts of information to successfully breastfeed, I had support from my husband and family. I wanted my baby to avoid the allergies I have by breastfeeding. I knew all the reasons why I should and needed to breastfeed my baby. Unfortunately events after my son's birth did not allow for such a relationship.

My son was placed on my chest soon after he was born. I vomited suddenly due to the drugs I had been given because of the complicated labour. His father took hold of him. My next chance to hold him was five hours later in the nursery. I was unable to move, so a midwife placed him next to me, and squeezed my nipple in attempt to have my son attach. My semi-conscious state let her do this. It was fruitless and intrusive.

I next saw my son the following afternoon. I had been told by the midwives to express whenever I could, but was left to myself, with no reminder to express. My son meanwhile had a feeding tube stuffed down his nose, because the hospital had told me I was unable to get to him frequently enough to feed him. My mind started to reel. I desperately wanted to start on my envisaged breastfeeding relationship with my son but the hospital, whilst in theory supported it, thwarted it. I was confused; all the things I had learnt about breastfeeding and the immediate bonding that all the literature and current thought pushed were slipping away from me. The staff wouldn't let my baby sleep in the same bed as me; I kept the light on at night and tried to stay awake for fear of them catching me in bed with him. I know now this to be a stupid response to a stupid situation.

Further to this, when my son was finally returned to me, I was constantly told he wasn't attaching properly. My nipples became cracked and grazed. My baby was becoming slightly dehydrated. I became stressed and worried that he would be called a "failure to thrive baby". Needing the rest, I sent him to the nursery overnight. I asked the staff to wake me when he needed feeding. The nurses on duty in the nursery had an aversion to breastfeeding – discovered through conversation with them – and did not wake me, instead they fed him formula. When I went in to feed him at four in the morning, I was told I should be able to breastfeed with my breasts as they were the right size. I was also told by another nursery nurse that she started feeding her son

solids at three weeks and there's nothing wrong with him. How do you deflect that kind of stupidity?

My baby still wasn't attaching properly – according to the hospital staff. I was discharged on my third day, but he wasn't. In my last 10 hours in hospital not one staff member came to see me or my baby. I was totally distraught, and finally checked myself out, after seeing one last nurse who seemed to have reasonable lactation training and gave us the all clear for attachment issues. I finally left the Royal Brisbane Women's Hospital at 9:00 at night. Nearly eleven hours after I rightfully should have gone home.

We bought a can of lactose free formula on the way home, and fed our son. I need to rest my mind, body and breasts. The next day I expressed using an electric pump hired from the ABA (given to us with full instructions and much needed helpful support). I expressed every hour for 20-30 minutes at a time. I spent the next two days expressing as often as I could and placing my son to my breasts as often as he wanted. My milk had still not come in after five days. My son had only had mere milliliters of colostrum, and several bottles of formula.

My milk finally came in on day six. Finally I could start to breastfeed my son. I have since discovered that due to the long labour and traumatic events afterward, including both my son and I being put on Metrogyl antibiotics, that it is quite common for a delay in milk onset; much stress could have been relieved if someone had told me this before hand.

Over the next two weeks I battled with blocked ducts, mastitis and severe nipple thrush, the latter two caused in part by the antibiotics. My son also developed oral thrush, which hindered any relief of thrush for me. I was exhausted; feeding round the clock was becoming laborious and debilitating. My health was starting to fail, and I realized I had not recovered from the birth adequately.

I developed a vaginal infection and was put back on Metrogyl. Within hours of my starting the antibiotics, my baby became distressed. He was screaming in pain; his stomach hard and body rigid. He was having a common reaction to the Metrogyl. I was not informed that this would happen; later questioning confirmed that he might get a slight tummy ache. I called the ABA advise line and a breastfeeding specialist and I searched the internet for answers. I had to put my son back on formula. I decided to express my milk and discard it for the course of the antibiotics;

my plan was to resume breastfeeding as soon as I could. After several days of expressing every couple of hours and feeding and looking after my three week old son I realized I could not cope physically or mentally. I made the heartbreaking decision to wean him as I knew I would have to have another course of antibiotics. I cried for twenty-four hours. My milk dried up within a week, I was finally able to relax and enjoy my new non-breastfeeding relationship with my son. I have no regrets about discontinuing breastfeeding my son; he is a happy healthy baby in the 97th percentile on all the Queensland Health charts. He is not having his full manufacturers recommended quota of formula each day, as it would make him overweight and ill.

Subsequently I have had surgery to repair damage caused stitching needed because of the long labor. I have been told by several medical specialists that it is probably a good thing that I am no longer breastfeeding as it can hinder healing in the vaginal area (due to hormonal levels).

I have often thought to myself that if we lived one hundred or so years ago, my baby most likely would be wet-nursed. Or he would have a family of carers to look after him during the day in a loving home environment, I would rest and he would be brought to me when he needed feeding – the traditional way. Our exclusive modern day culture does not allow for such a thing to happen, we have become isolated from other human support. As for having a wet-nurse; even if I had asked one of my breastfeeding friends to feed my son, I'm sure they would not complete my request. Why not turn to formula?

From personal observation exclusive breastfeeding can sometimes also lead to exclusive mothering. Some fathers have no say or role in daily care of their baby's as some mothers just won't let the baby go. Bottle feeding, whilst not the sole reason, has allowed both my husband and I to have an equal relationship with our child. There seems to be no other option forced upon us but to breastfeed. What if women can't breastfeed or health reasons do not permit it? What are the alternatives? I see none.

In short the confusing pressures of a public hospital stay, my poor health due to infection and vaginal damage and the exclusive nature of modern society all contributed to my non-breastfeeding relationship with my son. Not lack of education or encouragement and support, or a push from infant formula manufacturers, or lack of desire contributed to my not breastfeeding my child.